



Clinical Guidelines for the use of **Blood products** in South Africa

3rd Edition

Edited by the Medical Directors of the
South African National Blood Service

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DISCLAIMER

The editors of this publication have made every effort to ensure that the information given in this publication is accurate. However it is good medical practice and strongly recommended that the dosages and indications for the scheduled products mentioned in this booklet be confirmed as it may differ from the MCC approved package inserts. This can be done with reference to the printed package insert, which have been approved by the Medicines Control Council and included in each pack. Alternatively, for NBI products specifically this can be done by contacting the NBI information centre on (031) 719 6789 or 082 870 3705 or 082 895 0056

The South African National Blood Service or the Western Province Blood Transfusion Service or the National Bioproducts Institute cannot be held responsible for any errors or omissions contained within this publication.

FOREWORD

Blood transfusion is the cornerstone of therapy for many serious and common diseases. Indeed, without blood products it would be impossible to implement many of the modern regimens used for the treatment of malignant diseases and perform the complex surgery now regarded as routine.

South Africa is in the fortunate position to be self-sufficient for blood products. Voluntary non-remunerated donors donate our blood and this ensures that the safety of our blood compares favourably with that of the rest of the developed world. This is remarkable considering that we procure our blood in a country regarded as one most severely affected by the HIV/AIDS pandemic.

The ready availability of low-risk blood is a blessing, but also an insidious trap. We tend to prescribe blood too readily and often do not consider alternative options. There are compelling reasons to use blood products appropriately and only if there is no alternative.

First, blood is a scarce national resource. There is a chronic shortage of blood and it is becoming increasingly difficult and expensive to procure sufficient blood from low-risk donor populations.

Second, blood transfusion is not without risk. We tend to think that this risk is only the transmission of transfusion-transmissible agents, particularly HIV. There are however other serious hazards of transfusion, such as haemolytic transfusion reactions, most which are caused by administrative errors in the blood bank or the hospitals.

We therefore owe it to our patients to use blood appropriately and to manage actively the risk inherent in a transfusion. This is simply good clinical practice! We must also remember that blood is only available because of the unselfishness and social responsibility of the blood donors. The donors expect us to use their blood appropriately.

Clinical Guidelines for the use of Blood Products is the outcome of the combined efforts of the medical directors of all the blood transfusion services of South Africa. They must be congratulated on their efforts. The publication and distribution of the Guidelines would also have been impossible without the sponsorship of Adcock Ingram Critical Care.

The end result is a quality manual that does the blood services proud. No doubt, all health care workers and students will regularly use this practical manual. Ultimately the patients will reap the benefit.

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